



HANDBOOK FOR ELECTRONIC PROCESSING

Chapter 300 Requirements for Electronic Processing

Illinois Department of Healthcare and Family Services

CHAPTER 300

HANDBOOK FOR ELECTRONIC PROCESSING

TABLE OF CONTENTS

300 Basic Provisions/Information

- .1 General Information
 - .1 Purpose of the Handbook for Electronic Processing
- .2 Attachment(s) Information
- .3 Voids/Replacements Information
 - .1 Institutional - Void/Cancel of Prior Claim (Bill Type “8”)
 - .2 Institutional - Replacement of a Prior Claim (Bill Type “7”)
 - .3 Professional - Void/Cancel of Prior Claim (Bill Type “8”)
 - .4 Professional - Replacement of a Prior Claim (Bill Type “7”)
- .4 Coordination of Benefits (COB) Information
 - .1 Insurance in addition to Illinois Medicaid
 - .2 Medicare Crossover Claims
 - .3 COB - Reporting Prior Payment
 - .4 Coordination of Benefits
- .5 Technical Information
 - .1 Control Segments/Envelopes (ISA/IEA, GS/GE, ST/SE)
 - .2 Functional Acknowledgements
 - .3 Validation of EDI Transmissions
- .6 Trading Partner Agreements

301 837 Institutional

- .1 General Information
- .2 Technical Information
- .3 Void or Replacement Claims
 - .1 Void/Cancel of Prior Claim (Bill Type “8”)
 - .2 Replacement of a Prior Claim (Bill Type “7”)
- .4 Coordination of Benefits (COB) Information
 - .1 Insurance in addition to Illinois Medicaid
 - .2 Medicare Crossover Claims
 - .3 COB - Reporting Prior Payment
 - .4 Coordination of Benefits

302 837 Professional

- .1 General Information
- .2 Technical Information
- .3 Void or Replacement Claims
 - .1 Void/Cancel of Prior Claim (Bill Type “8”)
 - .2 Replacement of a Prior Claim (Bill Type “7”)
- .4 Coordination of Benefits (COB) Information
 - .1 Insurance in addition to Illinois Medicaid
 - .2 Medicare Crossover Claims
 - .3 COB - Reporting Prior Payment
 - .4 Coordination of Benefits
- .5 Transportation Information

303 837 Dental

- .1 General Information
- .2 Technical Information

304 NCPDP

- .1 General Information
- .2 Transaction Types
- .3 Business Rules
 - .1 General Billing
 - .2 Payor Sheets
 - .3 Partial Files
 - .4 Prior Approvals
 - .5 Compound Drugs
- .4 Transaction Responses
 - .1 Transmission Reject Response
 - .2 Billing Transaction Responses (B1)
 - .3 Reversal Transaction Responses (B2)
 - .4 Rebill Transaction Responses (B3)
 - .5 Eligibility Verification Transaction Responses (E1)
 - .6 Information Reporting Responses (N1, N2 and N3)
 - .7 Prior Approval Request and Billing Responses (P1)
 - .8 Prior Approval Reversal Responses (P2)
 - .9 Prior Approval Inquiry Responses (P3)
 - .10 Prior Approval Request Responses (P4)
- .5 Third Party Liability

305 835 Health Care Claim Payment/Advice

- .1 General Information
- .2 Technical Information
- .3 Overpayment Recovery

306 276/277 Health Care Claim Status Request and Response

- .1 General Information
- .2 Technical Information

307 270/271 Health Care Eligibility Benefit Inquiry and Response

- .1 General Information
- .2 Technical Information

308 278 Health Care Services Review – Request for Review and Response

- .1 General Information
- .2 Attachment(s) Information
- .3 Technical Information

309 Managed Care Organization

- .1 General Information
- .2 820 – Payroll Deducted and Other Group Premium Payment for Insurance Products
 - .1 General Information
 - .2 Technical Information
- .3 834 – Benefit Enrollment and Maintenance
 - .1 General Information
 - .2 Technical Information
- .4 837I – Health Care Claim: Institutional
 - .1 Technical Information
- .5 837P – Health Care Claim: Professional
 - .1 Technical Information
- .6 NCPDP – Version 1.1 Batch
- .7 835 – Health Care Claim: Payment/Advice
 - .1 Technical Information

APPENDICES**APPENDIX 1 EDI Control (Packaging/Enveloping of Transmissions)****APPENDIX 2 Provider Payor Sheets For NCPDP Version 5.1 ECP Input Transactions****APPENDIX 3 Provider Input Sheets For NCPDP Version 5.1 ECP Response Transactions****APPENDIX 4 Category of Service/Taxonomy Default Table for 837I****APPENDIX 5 Category of Service/Taxonomy Default Table for 837P****APPENDIX 6 Edits and Rejections**